

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 15 | 5-11-61 |
| FORMALITY REVIEW | H.T. | 913 | 06/13/61 |
| RESPONSE FORMALITY REVIEW | 12 | 947 | 10/10/61 |
| <i>Response</i> | <i>K</i> | 1019 | 11-20-61 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) Canceled A Appeal
 - Restricted O Objected

| Claim | Date |
|----------------|------|
| Final Original | |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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6/13/61